

REFERENCES, RESOURCES and GENERAL INFORMATION

Appendix A

MILITARY AND FEDERAL GOVERNMENT LINKS

Note: The Federal Web Locator is a quick way to obtain the web site of numerous federal agencies. The address is:

<http://www.infoctr.edu/fwl/>

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MILITARY LINKS:

GENERAL MILITARY LINKS

Army Emergency Relief	http://www.aerhq.org/
Army Center for Excellence in Subsistence	http://www.quartermaster.army.mil/ACES/
Army Research Institute	http://www-ari.army.mil/
American Red Cross	http://www.redcross.org/
ARPERCEN (Access to other USAR links)	http://www.2xcitizen.usar.army.mil/
Army Times Publishing	http://www.armytimes.com/
(Click on the magazine you want to see - Army, AF, Navy, MC.)	
Asst. Secretary of the Army for Financial Management and Comptrollership	http://www.asafm.army.mil/
Center for Army Lessons Learned (CALL)	http://call.army.mil
Center for Military History	http://www.army.mil/cmh-pg/
CGSC Combined Arms Library	http://www.cgsc.army.mil/carl/
Current Military Pay Rates	http://www.dfas.mil/money/
DC Military(Military News in the DC Area)	http://www.dcmilitary.com/
Defense Accounting and Finance Service	http://www.dfas.mil/
Defense Link	http://www.defenselink.mil/
U.S. Army Home Page	http://www.army.mil/
U.S. Army Portal and AKO	http://www.us.army.mil/
US Army Reserve Portal	https://www.2xcitizen.usar.army.mil/portal/
U.S. Navy	http://www.navy.mil/
U.S. Air Force	http://www.af.mil/index.html
U.S. Marine Corps	http://www.usmc.mil/
U.S. Coast Guard	http://www.uscg.mil/
Defense News	http://www.defensenews.com/
Defense Technical Information Center (DTIC)	http://www.dtic.mil/
General Dennis J. Reimer Training and Doctrine Digital Library	http://www.adtdl.army.mil/rtdddltextv.html

Federal Times	http://www.federaltimes.com/
Military City Online	http://www.militarycity.com/
Military Family Institute	http://mfi.marywood.edu/
Military Woman Home page	http://www.militarywoman.org/
Army MWR Home Page	http://www.armymwr.com/
National Military Family Association	http://www.nmfa.org/
Per Diem Rates	http://www.dtic.mil/perdiem/pdrates.html
U.S. Army Administrative Publications	http://www.usapa.army.mil/gils/

MEDICAL AND DENTAL MILITARY LINKS

AMEDD C&S	http://fshtx.army.mil/ameddcs/
USACHPPM	http://chppm-www.apgea.army.mil/
Army Medicine Homepage	http://www.armymedicine.army.mil/
AMSC Homepage	http://www.amsc.amedd.army.mil/
Armed Forces Institute of Pathology	http://www.afip.org/
National Women's Health Information Center	http://www.4woman.org/
DOD Health Affairs Homepage	http://www.ha.osd.mil/
DOD Telemedicine Links	http://www.dod-telemedicine.org/links/military.html
TRICARE	http://www.tricare.osd.mil/
Uniformed Services University of Health Sciences	http://www.usuhs.mil/
U.S. Army Veterinary Corps	http://vets.amedd.army.mil/dodvsa/

FEDERAL GOVERNMENT

HEALTH RELATED FEDERAL AGENCIES

Veterans Administration	http://www.va.gov/
Public Health Service	http://www.usphs.gov/
Department of Health and Human Services	http://hhs.gov/
Center for Disease Control and Prevention	http://www.cdc.gov/
School of Aerospace Medicine, Brooks AFB	http://wwwsam.brooks.af.mil/

OTHER FEDERAL AGENCIES

United States Agency for International Development (USAID)	http://www.usaid.gov/
USAID Office of Foreign Disaster Assistance (OFDA)	http://www.usaid.gov/ofda/
Central Intelligence Agency Country Studies	http://www.odci.gov/cia/publications/factbook/index.html
FEDWORLD	http://www.fedworld.gov/
Government Accounting Office (GAO)	http://www.gao.gov/
Internal Revenue Service	http://www.irs.ustreas.gov/prod/cover.html

State Department Travel Warnings
The White House
Thomas Access to Congress and
Current Legislation
National Technical Information Service
(Army manuals & Publications)
U.S. Treasury Department

http://travel.state.gov/travel_warnings.html
<http://www.whitehouse.gov/>
<http://thomas.loc.gov/>
<http://www.ntis.gov/databases/armypub.html>
<http://www.ustreas.gov/>

INTERNATIONAL LINKS:

MILITARY LINKS

Armed Forces of the World - Canada

<http://www.cfcsc.dnd.ca/links/milorg/index.html>

NATO

<http://www.nato.int/>

INTERNATIONAL ORGANIZATIONS

World Health Organization

<http://www.who.int/home-page/>

The United Nations

Homepage

<http://www.un.org/>

Peace Keeping Operations

<http://www.un.org/peace/>

Mapping Service

<http://www.un.org/Depts/Cartographic/english/htmain.htm>

World Food Program

<http://www.wfp.org/index.html>

Country Links

Appendix B

A LESSON IN ALPHABET SOUP

Many phrases commonly used in the Army are expressed as acronyms. These abbreviations often take on their own pronunciation, and entire new words are born. Acronyms are confusing if you don't know their true meaning. This list contains some of the more common abbreviations.

<u>Acronym</u>	<u>Meaning</u>
AC	Active component
ACS	Army Community Service
AD	Active duty
ADMIN	Administrative
ADT	Active duty for training
AGR	Active Guard Reserve
AMEDD	Army Medical Department
AR	Army Regulation
ARPRCEN	Army Personnel Center
ASF	Aeromedical Staging Facility
AT	Annual training
AUS	Army of the United States
AWOL	Absent without leave
BAS	Basic Allowance for Subsistence
BAH	Basic Allowance for Housing
BCT	Basic combat training
CHS	Combat Support Hospital
CHAMPUS Services	Civilian Health and Medical Program of the Uniformed
CINC	Commander-in-Chief
CMS	Central Material Supply
CO	Commanding officer
COLA	Cost of living allowance
COM	Command
COMMZ	Communications Zone
CONUS	Continental United States
COSCOM	Corps Support Command
CSS	Combat Service Support
CZ	Combat Zone
DA	Department of the Army
DA PAM	Department of the Army Pamphlet
DEERS	Defense Eligibility Enrollment Reporting System
D-Day	Day on which operations begin
DEF	Defense

DFAS	Defense Finance and Accounting Service
DFAS-IN	Defense Finance and Accounting Service - Indianapolis
DIC	Dependency and Indemnity Compensation
DISCH	Discharge
DOD	Department of Defense
DVA	Department of Veterans Affairs
EFT	Electronic Funds Transfer
EPW	Enemy prisoner of war
EUR	Europe
EX	Exercise
EXEC	Executive
FCP	Family care plan
FEBA	Forward Edge of the Battle Area
FICA	Federal Insurance Contribution Act
FLOT	Forward Line of Own Troops
FM	Field Manual
FOR	Forces
FORSCOM	United States Army Forces Command
FSA	Family separation allowance
GP	Group
HFP	Hostile fire pay
ID	Identification (card)
IG	Inspector general
INFO	Information
INS	Instruction
JAG	Judge advocate general
LES	Leave and earning statement
MASH	Mobile Army Surgical Hospital
MEDCOM	Medical Command
MEDCEN	Medical Center
MEDDAC	Medical Department Activity
MEDSOM	Medical Supply, Optical, and Maintenance
MOPP	Mission Oriented Protective Posture
MOS	Military Occupational Specialty
MRE	Meals-Ready-to-Eat
MTF	Medical Treatment Facility
MUTA	Multiple unit training assembly
NBC	Nuclear, Biological, and Chemical
NBI	Nonbattle Injury
NCO	Non-Commissioned Officer
NCOIC	Non-Commissioned Officer in Charge
NSLI	National Service Life Insurance
OCONUS	Out of Continental United States
OJT	On the Job Training
OIC	Officer in Charge
OPLAN	Operation Plan

PCS	Permanent Change of Station
PERSCOM	U.S. Total Army Personnel Command
PMCS	Preventive Maintenance, Checks, and Services
POC	Point of Contact
POL	Petroleum, Oils, and Lubricants
POR	Preparation of Replacements for Overseas Movements
PX	Post Exchange
RATS	Rations
RC	Reserve Component
ROTC	Reserve Officer Training Corps
RSO	Retirement Services Office(r)
SBP	Survivor Benefit Plan
SEP	Separation
SGLI	Serviceman's Group Life Insurance
SOP	Standard Operating Procedure
SSBP	Supplemental Survivor Benefit Plan
SSI	Specialty Skill Identifier
SYS	Systems
TA	Theater Army
TAACOM	Theater Army Area Commander
TTAD	Temporary Tour of Active Duty
TB	Technical Bulletin
TC	Training Circular
TDA	Table of Distribution and Allowances
TDRL	Temporary Disability Retired List
TDY	Temporary Duty
TEM	Temporary
TM	Technical Manual
TO	Theater of Operations
TOE	Theater of Organization and Equipment
TR	Transportation request
USAR	United States Army Reserve
USFSPA	Uniformed Services Former Spouses Protection Act
USSAH	United States Soldiers and Airmen's Home
USVIP	Uniformed Services Voluntary Insurance Program
UTA	Unit Training Activity
VEAP	Veterans Education Assistance Program
VGLI	Veterans Group Life Insurance
WIA	Wounded in Action
XO	Executive Officer
ZI	Zone of the Interior

Appendix C

Helpful Terms

Army Career and Alumni Program

Transition and job assistance for retiring soldiers, civilians, and their family members

Army Emergency Relief

A private organization which provides financial assistance to active and retired soldiers and their families

Arrears in pay

Retired pay which has not been paid to the retired soldier before his or her death

Army Echoes

An authorized periodical published for retired soldiers and their annuitant survivors

Base amount

Gross retired pay or any amount down to \$300 upon which an SBP annuity is based

CHAMPUS

A program that shares with retired soldiers and their families the cost of medical care through civilian sources

Deemed SBP election

An SBP election established by a former spouse's request when a retired soldier has failed to establish the election in compliance with a court order to do so

DEERS

A data base containing information on beneficiaries eligible for military medical care and CHAMPUS

Dependency and Indemnity Compensation (DIC)

A tax-free, monthly compensation paid by the VA when an active or retired soldier's death is due to an injury or illness incurred on or aggravated by active duty.

Disposable retired pay

Retired pay which may be divided with a former spouse as property when a court so orders

Electronic Funds Transfer

A method of electronically sending retired pay to a financial institution

Gray area retiree

A reserve soldier who has completed 20 years service, qualifying for retirement purposes but who has not reached age 60 and entitled to retired pay

Non-annuitant spouse

A surviving spouse who is not eligible for a Survivor Benefit Plan annuity

Retirement Services Office

A local office that provides information and assistance to retired soldiers and their families

Survivor Benefit Plan (SBP)

A plan into which retiring soldiers may enroll to provide for continuation of a portion of their retired pay to survivors

Supplemental SBP

A plan which can be elected by retiring and retired soldiers to increase the age-62 SBP annuity by 5 percent, 10 percent, 15 percent, or 20 percent of the base amount.

Unpaid retired pay

The same as arrears of pay

Uniformed Services Former Spouses Protection Act

A law that provides benefits for former spouses of retired soldiers

US Voluntary Insurance Program

A private health insurance for those who lose eligibility for medical care through the military medical care system

Veterans' Educational Assistance Program (VEAP)

A program run by the VA that pays education benefits to soldiers based on active duty served

VGLI

A renewable VA insurance available to retiring soldiers

Appendix D

UNCONVENTIONAL WARFARE TERMS

Auxiliary Units: A civilian organization which supports the resistance movement through clandestine operations by providing the guerrilla force with food, clothing, shelter, arms, ammunition, early warning, intelligence, replacements, funds, medical supplies, and moral support.

Cold War: A state of international tension wherein political, economic, technological, sociological, psychological, paramilitary, and military measures short of overt armed conflict involving regular military forces are employed to achieve national objectives.

Counterinsurgency Operation: Operations against insurgent forces.

Guerrilla Warfare: Military and paramilitary operations conducted in enemy-held or hostile territory by irregular predominately indigenous forces.

Infiltration: Movements of individuals or vehicles, singularly or in small groups at extended or irregular intervals.

Insurgency: A condition resulting from a revolt or insurrection against a constituted government that falls short of civil war.

Irregular Forces: Irregular forces refer in a broad sense to all types of insurgents to include partisans, subversives, terrorists, revolutionaries, and guerrillas.

Military Intelligence: Knowledge of a possible or actual enemy or area of operation.

Paramilitary Forces: Forces or groups which are distinct from the regular Armed forces of any country, but resembling them in organization, equipment, training, or mission.

Special Warfare: Special warfare is a term used by the US Army to embrace all military and paramilitary measures and activities related to unconventional warfare, counterinsurgency, and psychological warfare.

Subversion: Action designed to undermine the military, economic, psychological, moral, or political strength of a regime.

Unconventional Warfare: The interrelated fields of guerrilla warfare, evasion and escape, and resistance. Such operations are conducted in enemy-held or controlled territory and are planned and executed to take advantage of or to stimulate resistance and movements or insurgency against hostile governments or forces. In peacetime, the United States conducts training to develop its capability for such wartime operations.

Appendix E

Military Regulations and Publications

Army Regulations:

AR 5-13	Training Ammunition Management System
AR 10-6	Branches of the Army
AR 10-43	US Army Health Services Command
AR 10-87	Major Army Commands in the Continental United States
AR 40-1	Composition, Mission, and Functions of the Army Medical Dept
AR 40-2	Army Medical Treatment Facilities: General Administration
AR 40-3	Medical, Dental, and Veterinary Care
AR 40-4	Army Medical Department Facilities/Activities
AR 40-5	Preventive Medicine
AR 40-13	Medical Support- Nuclear/Chemical Accidents and Incidents
AR 40-25	Nutrition Allowances, Standards, and Education
AR 40-48	Nonphysician Health Care Providers
AR 40-61	Medical Logistics Policies and Procedures
AR 40-66	Medical Record and Quality Assurance Administration
AR 40-68	Quality Assurance Administration
AR 40-90-1	Professional Specialty Recognition of Army Medical Department Officer and Enlisted Personnel
AR 40-400	Patient Administration
AR 40-501	Standards of Medical Fitness
AR 95-1	Flight Regulations
AR 95-3	Aviation: General Provisions, Training, Standardization, and Resource Management
AR 135-101	Appointment of Reserve Commissioned Officers for Assignment to AMEDD branches
AR 135-175	Separation of Officers (Voluntary and involuntary separation of USAR Officers)
AR 140-145	Individual Mobilization Augmentee (IMA) Program
AR 190-11	Physical Security of Arms, Ammunition, and Explosives
AR 190-13	The Army Physical Security Program
AR 190-30	Military Police Investigations
AR 190-52	Countering Terrorism and Other Major Disruptions on Military Installations
AR 190-56	The Army Civilian Police and Security Guard Program
AR 220-1	Unit Status Reporting
AR 220-10	Preparation of Overseas Movement of Units (POM)
AR 301-12	Subversion and Espionage Directed Against U.S. Army (SAEDA)
AR 310-25	Dictionary of United States Army Terms

AR 310-50	Authorized Abbreviations and Brevity Codes
AR 340-15	Preparing Correspondence
AR 350-9	Overseas Deployment Training
AR 350-15	The Army Physical Fitness Program
AR 350-17	Noncommissioned Officer Development Program
AR 350-21	Service Benefits
AR 350-28	Army Exercises
AR 350-38	Training Device Policies and Management
AR 350-30	Code of Conduct Training
AR 350-41	Training in Units
AR 350-91	Army Individual Evaluation Program
AR 350-216	The Geneva/Hague Convention
AR 350-225	Survival, Evasion, Resistance and Escape
AR 351-1	Individual Military Education and Training
AR 351-3	Professional Education and Training of AMEDD Personnel
AR 360-61	Community Relations
AR 380-5	Department of the Army Information Security Program
AR 380-19	Information Systems Security
AR 381-12	Subversion and Espionage Directed Against U.S. Army (SAEDA)
AR 385-10	The Army Safety Program
AR 385-32	Protective Clothing and Equipment
AR 385-40	Accident Reporting and Records
AR 385-55	Prevention of Motor Vehicle Accidents
AR 385-63	Policies and Procedures for Firing Ammunition for Training, Target Practice, and Combat
AR 385-95	Army Aviation Accident Prevention
AR 420-55	Food Services and Related Equipment
AR 500-4	Military Assistance to Safety and Traffic (MAST)
AR 525-13	The Army Combating Terrorism Program
AR 530-1	Operations Security (OPSEC)
AR 600-8-101	Personnel Processing (In- and Out- and Mobilization Processing)
AR 600-9	The Army Weight Control Program
AR 600-10	The Army Casualty System
AR 600-20	Army Command Policy and Procedures
AR 600-21	Equal Opportunity Policy
AR 600-25	Salutes, Honors and Visits of Courtesy
AR 600-30	Moral Leadership and Chaplain Activities
AR 600-50	Standards of Conduct for Department of Army Personnel
AR 600-85	Alcohol and Drug Abuse Prevention and Control Programs
AR 600-100	Army Leadership
AR 600-130	Officer Procurement Programs of the Army Medical Department
AR 600-200	Enlisted Personnel Management System
AR 601-142	Army Medical Department Professional Officer Filler System
AR 601-210	Regular Army and Army Reserve Enlistment Program
AR 601-280	Army Reenlistment Program
AR 611-101	Commissioned Officer Classification System

AR 611-201	Enlisted Career Management Fields and Military Occupational Specialties
AR 614-5	Permanent Change of Station Policy
AR 614-100	Officer Assignment Policies, Details, and Transfers
AR 614-105	Initial Assignment of Regular Army Second Lieutenants
AR 614-120	Interservice Transfer of Army Commissioned Officers on the Active Duty List
AR 614-200	Selection of Enlisted Soldiers for Training and Assignment
AR 621-1	Training of Military Personnel at Civilian Institutions
AR 623-1	Academic Evaluation Reporting System
AR 623-105	Officer Evaluation Reporting System
AR 624-100	Promotions of Officers on Active Duty
AR 630-5	Leaves and Passes
AR 630-10	Absence Without Leave and Desertion
AR 635-100	Officer Personnel (Separations and retirement)
AR 635-120	Officer Resignation and Discharges
AR 635-200	Enlisted Personnel (Enlisted personnel separations)
AR 640-10	Individual Military Personnel Records
AR 670-1	Wear and Appearance of Army Uniforms and Insignia
AR 672-10	Expert Field Medical Badge Test
AR 672-5-1	Military Awards
AR 680-29	Military Personnel—Organization and Type of Transaction Codes

Department of the Army Pamphlets

DA Pam 350-38	Standards in Weapon Training
DA Pam 351-4	U.S. Army Formal Schools Catalog
DA Pam 700-19	Procedures of U.S. Army Munitions Reporting Systems

Field Manuals

FM 8-8	Medical Support in Joint Operations
FM 8-10	Health Service Support in a Theater of Operations
FM 8-10-1	The Medical Company
FM 8-10-3	Division Medical Operations Center
FM 8-10-4	Medical Platoon Leaders' Handbook
FM 8-10-5	Brigade and Division Surgeons Handbook
FM 8-10-6	Medical Evacuation in a Theater of Operations
FM 8-10-7	Health Service Support in an NBC Environment
FM 8-10-9	Health Service Logistics in a Theater of Operations
FM 8-15	Health Service Support in a Combat Zone
FM 8-21	Health Service Support in a Communications Zone
FM 8-35	Evacuation of the Sick and Wounded
FM 21-2	Soldier's Manual of Common Tasks
FM 21-10	Field Sanitation
FM 21-20	Physical Readiness Training

FM 21-26	Map Reading
FM 21-76	Survival, Evasion, and Escape
FM 21-41	Soldier's Handbook for Defense Against Chemical and Biological Operations and Nuclear Warfare
FM 22-5	Drill and Ceremonies
FM 22-100	Military Leadership
FM 22-101	Leadership Counseling
FM 22-102	Soldier Team Development
FM 23-9	Rifle Marksmanship
FM 23-35	Pistols and Revolvers
FM 25-100	Training the Force
FM 25-101	Battle Focused Training
FM 27-1	Legal Guide for Commanders
FM 27-10	The Law of Land Warfare
FM 350-225	Survival, Evasion and Escape Training
FM 100-5	Operations
FM 100-10	Combat Service Support
FM 100-17	Mobilization, Deployment, Redeployment and Demobilization
FM 101-5-1	Operational Terms and Symbols

MEDCOM Supplements and Regulations

MEDCOM Suppl 1 to AR 380-5, DA Information Security Program Regulation
 MEDCOM Suppl 1 to AR 385-10, The Army Safety Program
 MEDCOM Suppl 1 to AR 530-1, Operation Security (OPSEC)
 MEDCOM Suppl 1 to AR 600-20, Army Command Policy
 MEDCOM Reg 10-1, Organization and Functions Policy
 MEDCOM Reg 40-5, Ambulatory Patient Care
 MEDCOM Reg 40-9, MEDCOM Exercise/Support Personnel
 MEDCOM Reg 40-25, Army Medical Department (AMEDD) Professional Officer Filler System
 MEDCOM Reg 190-1, MEDCOM Key and Lock Control and Physical Security Standards
 MEDCOM Reg 350-3, Reserve Component Training
 MEDCOM Reg 350-4, Readiness Training Requirements
 MEDCOM Reg 351-1, Individual Military Education and Training
 MEDCOM Reg 525-1, Soldier Readiness Exercise (Short Title)

Soldier Training Publications

STP (all skill levels). Soldier's Manual of Common Tasks

Department of the Army Pamphlets

DA PAM 50-6 Chemical Accident or Incident Response and Assistance (CAIRA)

DA PAM 108-1 Index of Army Motion Pictures and Related Audio-Visual Aids
DA PAM 310-12 Index and Descriptions of Army Training Devices
DA PAM 350-15 The Commander's Handbook on Physical Fitness
DA PAM 360-525 Family Assistance Handbook for Mobilization

FORSCOM/TRADOC Supplements

FORSCOM/TRADOC Suppl 1 to AR 385-95, Army Aviation Accident Prevention (ATPL),
(subject matter is endorsed by MEDCOM for aviation units)
FORSCOM Reg 40-3 AMEDD Professional Officer Filler System
TRADOC PAM 350-34 Education Video Tape Catalog

Regulatory Guidance

Joint Commission on Accreditation of Health Care Organizations (JCAHO) Standards
Reserve Component Training Development Action Plan (RC TDAP)

Additional References

TA 50-901 Clothing and Equipment (Peace)
TA 50-902 Clothing and Equipment (Mobilization)
TC 21-7 Personal Financial Management for Soldiers
MEDCOM Mission Statement
MEDCOM Annual Training Guidance
Any MEDCOM Memorandums of Understanding
Any MEDCOM Memorandums of Agreement

Referenced Forms

DA Pam 1-10 Improve Your Writing
DA Form 2 Personnel Qualification Record, Part I
DA Form 2-1 Personnel Qualification Record, Part II
DA Form 705 Physical Fitness Scorecard
DA Form 4187 Personnel Action
DA Form 5514-B TAMIS Training Ammunition Forecast Report

Appendix F

Insight on the Code of Conduct

“In the midst of winter, I found there was in me an invincible summer.”

--Albert Camus



In the event of capture or detention, the Code of Conduct provides moral guidance to assist military personnel in living up to the ideals of DOD policy. This guidance seeks to help US military personnel survive a hostage or detainment situation and does not constitute a means for judgment or replace the UCMJ as a vehicle for enforcement of proper conduct.

US military personnel, whether detainees or captives, can be assured that the US Government will make every good faith effort to obtain their earliest release. Faith in one's country and its way of life, faith in fellow detainees or captives, and faith in one's self are critical to surviving with honor and resisting exploitation.

ESTABLISHING MILITARY DISCIPLINE THROUGH A CHAIN OF COMMAND UNDER THE RANKING SERVICE MEMBER IS THE KEY TO SURVIVAL.

If held as a detainee, captive or hostage, you should:

- Maintain your military bearing.
- Remain calm, courteous, and project personal dignity.
- Resist attempts by captors to obtain classified information.
- Organize in a military manner under the senior military representative.
- Avoid any aggressive, combative, or illegal behavior.
- Seek immediate and continuous contact with US or friendly embassy personnel.
- Provide only name, rank, social security number.
- Revolve discussion around health and welfare matters.

- Avoid signing any form or document or making any statements.
- Attempt escape only after careful consideration.
- Never pander, praise, participate, or debate the terrorist's cause.

References: AR 350-216 Geneva and Hague Conventions
AR 350-30 Code of Conduct Training

Code of Conduct

1. I am an American Fighting Soldier. I serve in the forces which guard my country and our way of life. I am prepared to give my life in their defense.
2. I will never surrender of my own free will. If in command I will never surrender my men while they still have the means to resist.
3. If I am captured, I will continue to resist by all means available. I will make every effort to escape and aid others to escape. I will accept neither parole nor special favors from the enemy.
4. If I become a prisoner of war, I will keep faith with my fellow prisoners. I will give no information or take part in any action which might be harmful to my comrades. If I am senior, I will take command. If not, I will obey the lawful orders of those appointed over me and will back them up in every way.
5. When questioned, should I become a prisoner of war, I am required to give only my name, rank, service number, and date of birth. I will evade answering further questions to the utmost of my ability. I will make no oral or written statements disloyal to my country and its allies or harmful to their cause.
6. I will never forget that I am an American Fighting Soldier responsible for my action and dedicated to the principles which made my country free. I will trust in my god and the United States of America.

NOTE: You are not required to memorize the Code of Conduct. You should become familiar with the six items of the Code.

Appendix G

General Orders

1. I will guard everything within the limits of my post and quit my post only when properly relieved.
2. I will obey my special orders and perform my duties in a military manner.
3. I will report violations of my special orders, emergencies, and anything not covered in my instructions, to the commander of the relief.

NOTE: You should be able to recite the general orders.

Appendix H

Geneva and Hague Conventions

The basic principle of the Hague and Geneva Conventions is humanity. The Hague Rules are concerned with targeting and weapons. The Geneva Convention rules cover the conduct and protection of individual people caught up in combat. The Hague and Geneva Conventions and the Customary Law of War require that we, as American soldiers:

- Will not inflict unnecessary destruction or suffering in accomplishing our military mission.
- Will treat prisoners of war, other captured and detained personnel, and civilians humanely.
- Will not obey an order whose execution is a crime in violation of the law of war.
- Are personally responsible for unlawful acts committed by ourselves.
- Are entitled to humane treatment if we are captured or detained by the enemy. Specifically, the Geneva Prisoner of War Convention requires our captors to feed, shelter, and care for us. We can also practice our religion and send and receive mail and other items. These are our basic rights as prisoners of war.
- So long as we are held as prisoners of war, we must obey all the lawful camp rules. We may be punished for violating these rules, but the punishment must not endanger our health.
- Medical personnel who are captured should be allowed to care for their fellow prisoners.

Our captor may require us to work in limited circumstances. Prisoners of war who are not officers or non-commissioned officers may be compelled to perform labor which is neither military in character or purpose, nor humiliating, dangerous, or unhealthy. The removal of mines or similar devices is considered by the convention to be dangerous work. Noncommissioned officers may only be compelled to do supervisory work. Commissioned officers may volunteer but may not be compelled to work.

Article 41 of the Convention of Prisoners of War provides for the posting of a copy of the convention and its annexes, including any special agreements, all to be in the prisoner's own language, at places where all may read them.

An American soldier must obey promptly all legal orders. However, he or she also must disobey an order which requires commission of a criminal act. American soldiers are obligated to report any violations of the Law of War. This may be done through the chain of command or a report may be filed with the local office of the Inspector General, the office of the Provost Marshal, with a Judge Advocate or with the Chaplain. The officer who receives a report alleging a violation of the Law of War must take appropriate steps to report or investigate.

As American soldiers, it is our duty not to inflict any unnecessary suffering or destruction. We must treat all prisoners of war, other captured or detained persons, and all civilians humanely. We will not obey any order which requires us to commit a criminal act in violation of the Law of War. Any violation of the Law of War will be reported to the appropriate authorities. Above all, we must not forget that we will be held personally responsible for any unlawful act we commit.

By knowing our responsibilities as American soldiers, by reporting all suspected war crimes to the proper authorities, by knowing our rights, the rights of our enemy, and the rights of the civilian population, by respecting our law and honoring our Code as American soldiers, we will ensure that our military mission is performed honorably, contributing to a return to peace.

Appendix I

Survival Considerations

The will to survive is the most important factor

Survival actions:

- If you are alone, remember **SURVIVAL**:

Size up the situation.

Undue haste makes waste.

Remember where you are.

Vanquish fear and panic.

Improvise.

Value living.

Act like the natives.

Learn basic skills.

The Group:

- Organize group survival activities.
- Recognize one leader.
- Develop a feeling of mutual dependence within the group.
- No matter what the situation, the leader must make the decisions.

Use Natives:

- Let natives make initial contact. Deal with the recognized headman or chief to get what is needed.
- Show friendliness, courtesy, and patience. Do not show fright; do not display a weapon.
- Treat the natives with respect.
- Respect their local customs and manners.
- Respect personal property.
- Learn from the natives about getting food and drink. Seek their advice concerning local hazards.
- Avoid physical contact without seeming to do so.
- Paper money is worthless in many places. Hard coin is good. Also items such as matches, tobacco, salt, razor blades, empty containers, or cloth may be valuable bartering items. One word of caution —do not overpay.
- Leave a good impression. Others after you may need their help.

Areas of Importance for Survival

Navigation

- Find yourself.
- Route selection.
- Signal while traveling.

Health and hygiene

- Keep clean.
- Guard against intestinal sickness.
- Guard against heat or cold injury.
- Take care of your feet.

Hazards

- Biological hazards
- Insects and critters
- Poisonous snakes and lizards
- Poisonous and dangerous water animals
- Danger from mammals
- Poisonous plants
- Radioactive areas
- Chemical contamination

References

FM 21-26 Map Reading
FM 21-76 Survival, Evasion, and Escape
FM 21-41 Soldier's Handbook for Defense Against Chemical and Biological
 Operations and Nuclear Warfare
FM 27-10 The Law of Land Warfare
FM 350-225 Survival, Evasion and Escape Training

Appendix J

Guerrilla And Psychological Warfare: Questions Often Asked

What is guerrilla warfare?

Guerrilla warfare is military and paramilitary operations conducted on enemy-held or hostile territory by irregular, predominately local forces.

What are the requirements for a successful guerrilla operation?

- Cause
- Civilian support
- Unity of effort
- Outside assistance
- Favorable terrain
- Effective leadership
- Use of propaganda
- Intelligence effort
- Discipline

What are the three phases of guerrilla operations or insurgency?

- Initial or organization phase.
- Training and operation phase.
- All out assault of government forces.

On what are guerrilla tactics based?

- Surprise
- Mobility
- Dispersion of forces

What is psychological warfare?

The planned use of propaganda and exploitation of other actions, with the primary purpose of influencing the opinions, emotions, attitudes and behavior of the enemy, neutral or friendly foreign groups in such a way as to support the accomplishment of national aims and objectives.

Name the type of radio broadcasts used in psychological warfare operations.

Strategic
Tactical

What is the most effective appeal to a target audience?

Face to face contact.

Name the three types of media used in psychological operations.

Audio
Visual
Printed material

What is meant by "black", "white", and "gray" propaganda?

Black identifies the source incorrectly.
White identifies the source correctly.
Gray does not identify the source.

What are covert operations?

Those which do not disclose the source of origin.

What is the "scam formula"?

The scam formula is a method of analyzing and evaluating the source, content, audience, media, and effect of both enemy and friendly propaganda.

Appendix K

SAEDA

What is SAEDA? It is the acronym for Subversion and Espionage Directed Against the US Army.

What is subversion? Attempts by the enemy to compromise our faith, loyalties, and confidence. One example is propaganda.

What is espionage? Attempts by the enemy through covert means to hinder our goals and efforts. Two examples are spying and sabotage.

What is common trend for a foreign intelligence service to use? From a seemingly accidental or spontaneous meeting to threats of exposure for moral indiscretions.

Why must the Army have a positive SAEDA program? To indoctrinate all DA personnel on the methods used to subvert or trap soldiers into compromising security.,

What must all MACOM commanders have? An annual SAEDA training program which will reach all levels of subordinate units and supported commands.

Who would you notify of any actual or suspected SAEDA approach? The nearest military intelligence office, or if immediate contact is impractical, the unit security officer.

What would make an individual a prime candidate for SAEDA approach? Indebtedness, drug or alcohol abuse, defective moral character; that is, any reason for which an individual could be bribed or blackmailed.

What is the purpose of AR 381-12? To set forth responsibility, guidance, and procedures for the prompt recognition and reporting of the incidents of attempted criminal subversion, sabotage, international terrorism and espionage. Also included is training of Army personnel in such matters.

Who does SAEDA apply to? All DA civilians, active military and dependents, National Guard and Reserve personnel.

Where is the Army vulnerable to subversion and espionage? The continental United States and outside of CONUS.

Are defensive security measures designed enough to prevent sabotage? Never completely.

Who is responsible for the safeguarding of classified information? This is the responsibility of each individual who possesses or has knowledge of such information, regardless of how it was obtained.

What must the rank of the unit Security Manager be? He/she must be an officer, warrant officer, or noncommissioned officer E-7 or above, or a DA civilian GS7 or above.

What are the three classifications of defense information? Top secret, secret, and confidential.

A current list of combinations of classified document containers will be maintained on what form? The DA Form 727.

A physical inventory of all TOP SECRET material will be conducted on what date? On 1 April of each year.

What classification would be assigned to a document the compromise of which could be expected to result in exceptionally grave damage to the national security? Top Secret

What classification would be assigned to a document the compromise of which could be expected to result in serious damage to the national security? Secret

What classification would be assigned to a document the compromise of which could be expected to result in damage to the national security? Confidential

(Reference: AR 380-5)

Appendix L

FIELD SANITATION

1. What is sanitation?

Sanitation may be defined as the effective use of measures that will create and maintain healthful environmental conditions to include safeguarding of food and water and the control of disease-carrying insects and animals.

2. What is military sanitation?

Military sanitation includes the practice of both environmental sanitation and personal hygiene, particular within the framework of situations and experiences associated with Army life.

3. What are the five communicable disease groups classified by the Army?

Respiratory
Intestinal
Insect born disease
Venereal diseases
Miscellaneous diseases

4. What is artificial immunity?

Resistance to infection acquired from vaccines stimulating the body to produce antibodies or immunizing serums (injections already containing the desired antibodies).

5. For what use are iodine tablets and calcium hypochloride ampules?

To purify water.

6. Name five (5) diseases carried by mosquitoes.

Malaria
Dengue
Yellow Fever
Virus encephalitis
Filariasis

7. Name three (3) germs that flies may carry.

Typhoid
Cholera
Dysentery

8. What does the word "potable" mean when used in reference to water?

It is drinkable.

9. What are the four ways through which disease may be transmitted?

Physical contact
Droplets (water or dust in air)

Insects

Food

10. **To protect food and water, how far from a unit mess or water supply must a latrine be located?**

At least 100 yds (90-92 meters) from unit mess and at least 100 feet (30-31 meters) from water and downhill (water drains away from source).

Appendix M

TASK STANDARDS (ARTEP 8-955-MTP)

ELEMENTS: OT/PT SECTION SPECIALTY CLINICS

TASK: PROVIDE PHYSICAL THERAPY SERVICES (8-1-0241 CSH)

(FM 8-16)	(AR 200-1)	(AR 385-10)
(AR 40-3)	(AR 40-48)	(AR 40-501)
(AR 40-66)	(AR 611-101)	(AR 611-201)
(FM 21-20)	(FM 8-10)	(FM 8-230)
(FM 8-42)	(STP 21-III-MQS)	

ITERATION: 1 2 3 4 5
(Circle)

COMMANDER/LEADER ASSESSMENT: T P U
(Circle)

CONDITIONS: Patients have been directed to PT clinic for evaluative, supportive, or preventive care. Radiological, pharmacy, and laboratory support is available. PT is part of specialty clinics. The hospital may be subject to attack by threat forces, NBC attack, or radiological fallout. The CSOP and TSOP are available. NOTE: This will be performed by the OT/PT section, minimal care medical detachment, when attached. This task should not be trained in MOPP4.

TASK STANDARDS: All PT services are performed IAW accepted standards of practice, TSOP, and CSOP.

TASK STEPS AND PERFORMANCE MEASURES	GO	NO-GO
<p>* 1. OIC/NCOIC PT clinic supervises PT clinic operations. (STP 21-24-SMCT: 071-328-5301, 091-309-0710, 850-001-2001, 850-001-4001, STP 21-II-MQS: 01-4965.90-0001, 03-9001.10-0003, 03-9001.10-0004, 03-9001.12-0002, 03-9001.14-0002, 03-9001.15-0002, 03-9003.02-0001, 04-8951.00-8951, S3-9001.18-0001, STP 8-II-MQS: 01-8310.06-1017, 01-8310.06-6009, 01-8310.06-6020, 01-8310.65-4004, S1-8310.06-6019, S1-8310.60-4000)</p> <p>a. Schedule personnel staffing to ensure proper coverage.</p> <p>b. Manage in-service training program.</p> <p>c. Maintain call rosters.</p> <p>d. Participate in staff rounds IAW CSOP.</p>		

TASK STEPS AND PERFORMANCE MEASURES	GO	NO-GO
<ul style="list-style-type: none"> e. Maintain communication with hospital elements IAW TSOP and CSOP f. Maintain workload data and submit required reports IAW CSOP and TSOP. g. Coordinate with supply and service division for logistical support. h. Monitor periodic and unscheduled maintenance of equipment for compliance with applicable TM(s) and TSOP. i. Maintain accountability of supplies and equipment IAW CSOP and TSOP. j. Enforce safety procedures IAW AR 385-10, TSOP, and TSOP. k. Enforce environmental protection procedures IAW AR 200-1 and TSOP. <p>* 2. Physical therapist provides primary care of neurological and musculoskeletal conditions as physician extenders. (STP 8-II-MQS: 01-8310.65-4003, 01-8310.65-4004)</p> <ul style="list-style-type: none"> a. Validate appropriateness of referrals IAW AR 40-48 and the CSOP. b. Conduct baseline and progress evaluations IAW AR 40-48, AR 40-3, and the CSOP. c. Request X-rays, as required. d. Screen X-rays IAW CSOP. e. Prescribe selected medications IAW AR 40-48. f. Request lab tests IAW CSOP. g. Plan PT treatment programs IAW results of examination, AR 611-101, and CSOP. h. Establish treatment goals IAW results of examination and CSOP. i. Record patient evaluation IAW AR 40-66. j. Refer patients as required. k. Identify patient's profile needs IAW examination, CSOP, and AR 40-48. l. Consult with other care providers as required. m. Employ safety procedures IAW AR 385-10, CSOP, and TSOP. n. Employ environmental protection procedures IAW AR 200-1 and TSOP. 		

TASK STEPS AND PERFORMANCE MEASURES	GO	NO-GO
<p>3. PT personnel perform appropriate PT treatment. for neurological and musculoskeletal. (STP 8-91J14-SM-TG: 081-830-3005, 081-830-3007, 081-833-0007, 081-833-0010, 081-834-0020, 081-834-0030, 081-835-3014, 081-836-0004, 081-836-0005, 081-836-0008, 081-836-0013, 081-836-0016, 081-836-0017, 081-836-0018, 081-836-0019, 081-836-0020, 081-836-0021, 081-836-0031, 081-836-0032, 081-836-0033, 081-836-0034, 081-836-0035, 081-836-0036, 081-836-0037, 081-836-0038, 081-836-0039, 081-836-0040, 081-836-0041, 081-836-0042, 081-836-0043, 081-836-0044, 081-836-0045, 081-836-0046, 081-836-0047, 081-836-0048, 081-836-0049, 081-836-0050, 081-836-0051, 081-836-0052, 081-836-0053, 081-836-0054, 081-836-0055, 081-836-0056, 081-836-0057, 081-836-0058, 081-836-0059, 081-836-0060, 081-836-0061, 081-836-0062, 081-836-0063, 081-836-0064, 081-836-0065)</p> <ul style="list-style-type: none"> a. Provide gait training with or without assistive devices IAW FM 8-16. b. Perform nonsurgical debridement, dress burns, and/or wounds IAW FM 8-16, CSOP, and the TSOP. c. Provide residual limb wrapping and other appropriate amputee care IAW FM 8-16. d. Provide instruction in therapeutic stretching, strengthening, and functional exercises IAW FM 8-16 and FM 21-20. e. Provide modality treatment as indicated (heat, cold, electrical stimulation, traction, etc.) IAW FM 8-16 and CSOP. f. Enforce proper patient positioning IAW FM 8-16. g. Instruct patients in self-care IAW the treatment plan and CSOP. h. Perform pulmonary drainage and breathing exercise instruction IAW FM 8-16. i. Perform goniometric measurements, manual muscle testing, and other appropriate measurements IAW FM 8-16. j. Monitor patient functional/RTD status. k. Monitor patient response to treatment to determine status IAW FM 8-16 and CSOP. l. Report adverse patient response to treatment IAW CSOP. m. Document patient treatment IAW AR 40-66. n. Employ safety procedures IAW AR 385-10, CSOP, and TSOP. o. Employ environmental protection procedures IAW AR 200-1, CSOP, and TSOP. <p>4. PT personnel provide educational training in health/fitness and injury prevention. (STP 21-II-MQS: 03-9001.12-0002, STP 8-11-MQS: 01-8310.65-4003, 01-8310.65-4004)</p> <ul style="list-style-type: none"> a. Provide education and instructional guidance on prevention of musculoskeletal injuries to individuals and units IAW FM 8-42. b. Provide ergonomic and biomechanical consultation to individuals and units IAW FM 8-42. 		

TASK STEPS AND PERFORMANCE MEASURES	GO	NO-GO
<ul style="list-style-type: none"> c. Provide health/fitness consultation IAW FM 8-42, FM 21-20, and CSOP. d. Identify injury trends IAW CSOP. e. Provide consultation to other medical professionals (HN personnel, domestic support operations personnel, or coalition forces). <p>5. PT personnel maintain equipment. (STP 21-24-SMCT: 071-328-5301, 091-309-0710, 850-001-2001, 850-001-4001)</p> <ul style="list-style-type: none"> a. Perform PMCS of equipment IAW CSOP and manufacturer's instructions. b. Clean equipment and supplies between patient use IAW CSOP. c. Store equipment and supplies between patient use IAW CSOP. d. Request medical maintenance support IAW CSOP and manufacturer's instructions. e. Employ safety procedures IAW AR 385-10, CSOP, and TSOP. f. Employ environmental protection procedures IAW AR 200-1, CSOP, and TSOP. <p>6. PT personnel provide assistance during mass casualties. (STP 8-II-MQS: 01-8310.65-4003, 8310.65-4004; STP 8-91J14-SM-TG: 081-831-0007, 081-831-0008, 081-833-0007, 081-833-0010, 081-835-3014, 081-836-0016, 081-836-0022, 081-836-0023, 081-836-0041, 081-836-0042, 081-836-0043, 081-836-0052)</p> <ul style="list-style-type: none"> a. Assist in providing evaluation and treatment in the minimal or delayed areas for closed orthopedic injuries IAW AR 40-48 and CSOP. b. Assist orthopedic clinic personnel IAW CSOP. c. Provide crutch fitting and gait training IAW FM 8-16. d. Assist in the management of burns/wounds IAW FM 8-16, CSOP and TSOP. 		

TASK PERFORMANCE / EVALUATION SUMMARY BLOCK							
ITERATION	1	2	3	4	5		TOTAL
TOTAL TASK STEPS EVALUATED							
TOTAL TASK STEPS "GO"							
TRAINING STATUS "GO"/"NO-GO"							

“*” indicates a leader task step.

SUPPORTING INDIVIDUAL TASKS

References
STP 21-24-SMCT

Task Number
071-328-5301

Task Title
INSPECT PERSONNEL/EQUIPMENT

SUPPORTING INDIVIDUAL TASKS

References	Task Number	Task Title
	091-309-0710	SUPERVISE PREVENTIVE MAINTENANCE CHECKS AND SERVICES
	850-001-2001	ASSESS POTENTIAL FOR ACCIDENTS
	850-001-4001	INTEGRATE RISK MANAGEMENT IN PLATOON MISSION
STP 21-II-MQS	01-4965.90-0001	Supervise Unit Maintenance Operations
	03-9001.10-0003	Apply the Ethical Decision-Making Process
	03-9001.10-0004	Apply the Ethical Decision-Making Process as a Commander or Staff Officer
	03-9001.12-0002	Communicate Effectively
	03-9001.14-0002	Motivate Subordinates to Accomplish Unit Missions
	03-9001.15-0002	Conduct Subordinate Counseling
	03-9003.02-0001	Manage Accident Risk in Unit Operations
	04-8951.00-8951	Explain the Army's Training Philosophy
	S3-9001.18-0001	Manage Organizational Stress
STP 8-91J14-SM-TG	081-830-3005	PERFORM AUSCULTATION OF THE LUNGS
	081-830-3007	ADMINISTER POSTURAL DRAINAGE AND PERCUSSION ON AN ADULT
	081-831-0007	PERFORM A PATIENT CARE HANDWASH
	081-831-0008	PUT ON STERILE GLOVES
	081-833-0007	ESTABLISH A STERILE FIELD
	081-833-0010	CHANGE A STERILE DRESSING
	081-834-0020	APPLY A SHORT LEG CAST
	081-834-0030	APPLY A SHORT LEG SPLINT
	081-835-3014	OBTAIN A SPECIMEN FROM A WOUND
	081-836-0004	ADMINISTER A COMBINATION THERAPEUTIC ULTRASOUND WITH ELECTRICAL THERAPY TREATMENT
	081-836-0005	ADMINISTER A MOIST HEAT PACK TREATMENT (NON-CHEMICAL)
	081-836-0008	ADMINISTER A PARAFFIN BATH TREATMENT
	081-836-0013	ADMINISTER A CERVICAL TRACTION TREATMENT
	081-836-0016	ADMINISTER A WHIRLPOOL TREATMENT
	081-836-0017	ADMINISTER A CONTRAST BATH TREATMENT
	081-836-0018	INSTRUCT A PATIENT TO TRANSFER FROM WHEELCHAIR TO BED USING A SITTING TRANSFER
	081-836-0019	INSTRUCT ADVANCED SITTING TRANSFERS TO A PATIENT
	081-836-0020	INSTRUCT A PATIENT TO TRANSFER FROM WHEELCHAIR TO BED USING A STANDING TRANSFER
	081-836-0021	INSTRUCT ADVANCED STANDING TRANSFERS TO A PATIENT
	081-836-0022	USE THE TILT TABLE TO STAND A PATIENT

SUPPORTING INDIVIDUAL TASKS

References	Task Number	Task Title
	081-836-0023	AMBULATE A PATIENT IN THE PARALLEL BARS
	081-836-0031	PERFORM GIRTH MEASUREMENTS
	081-836-0032	ADMINISTER A GRIP STRENGTH TEST
	081-836-0033	PERFORM PASSIVE EXERCISES
	081-836-0034	ADMINISTER ASSISTIVE EXERCISES
	081-836-0035	INSTRUCT ACTIVE EXERCISES
	081-836-0036	ADMINISTER RESISTIVE EXERCISES
	081-836-0037	INSTRUCT QUADRICEPS STRENGTHENING EXERCISES
	081-836-0038	INSTRUCT BACK FLEXION EXERCISES
	081-836-0039	BANDAGE THE STUMP OF A PATIENT WITH AN ABOVE THE KNEE (AK) AMPUTATION
	081-836-0040	BANDAGE THE STUMP OF A PATIENT WITH A BELOW THE KNEE (BK) AMPUTATION
	081-836-0041	ADMINISTER A CRUTCH AMBULATION TREATMENT
	081-836-0042	INSTRUCT A PATIENT IN PROTECTIVE FALLING WITH CRUTCHES
	081-836-0043	ADMINISTER A CANE AMBULATION TREATMENT
	081-836-0044	MEASURE A PATIENT'S LEG LENGTH
	081-836-0045	MEASURE ANKLE JOINT SWELLING USING THE FIGURE-OF-8 METHOD
	081-836-0046	MEASURE JOINT RANGE OF MOTION (ROM) OF THE UPPER EXTREMITY JOINTS
	081-836-0047	MEASURE JOINT RANGE OF MOTION (ROM) OF THE LOWER EXTREMITY JOINTS
	081-836-0048	PERFORM GROSS MANUAL MUSCLE TESTING (UPPER EXTREMITY)
	081-836-0049	PERFORM GROSS MANUAL MUSCLE TESTING (LOWER EXTREMITY)
	081-836-0050	ASSESS ABNORMAL GAIT PATTERNS
	081-836-0051	ADMINISTER A CRYOTHERAPY TREATMENT
	081-836-0052	CLEAN A WHIRLPOOL BEFORE OR AFTER TREATMENT
	081-836-0053	ADMINISTER A THERAPEUTIC ULTRASOUND TREATMENT (DIRECT CONTACT METHOD)
	081-836-0054	ADMINISTER A THERAPEUTIC ULTRASOUND TREATMENT (UNDERWATER METHOD)
	081-836-0055	ADMINISTER A THERAPEUTIC ELECTRICAL STIMULATION TREATMENT
	081-836-0056	MEASURE CHEST EXPANSION
	081-836-0057	INSTRUCT PENDULUM (CODMAN'S) EXERCISES

SUPPORTING INDIVIDUAL TASKS

References	Task Number	Task Title
	081-836-0058	INSTRUCT IN ACTIVE HAND AND WRIST EXERCISES
	081-836-0059	INSTRUCT BACK EXTENSION EXERCISES
	081-836-0060	INSTRUCT ANKLE STRENGTHENING EXERCISES
	081-836-0061	INSTRUCT SHOULDER ISOTONIC STRENGTHENING EXERCISES
	081-836-0062	FABRICATE A FELT HEEL PAD
	081-836-0063	FABRICATE A FELT HEEL LIFT
	081-836-0064	TAPE AN ANKLE
	081-836-0065	INSTRUCT DYNAMIC EXERCISES TO A LOWER EXTREMITY AMPUTEE
STP 8-II-MQS	01-8310.06-1017	Report Medical Materiel Type I Complaint
	01-8310.06-6009	Prepare a Medical Standing Operating Procedure
	01-8310.06-6020	Manage the Users' Maintenance of Medical Equipment
	01-8310.65-4003	Supervise the Treatment Protocols for the Practice of Physical Therapy
	01-8310.65-4004	Ensure That Physical Therapy Section Services Provide for the Needs of Combat Casualties
	S1-8310.06-6019	Explain the Management of Medical Equipment Sets
	S1-8310.60-4000	Explain the Command Responsibilities and Roles of a Clinic or Service Chief in a TOE Hospital

OPFOR TASKS AND STANDARDS

NONE:

APPENDIX N

SP AFTER ACTION REPORT

Title/Name of Mission

Name, Rank

Medical Unit

Inclusive Dates

1. Mission.
 - a. Unit Mission.
 - b. Section Mission.
 - c. Higher Headquarters.
2. Itinerary (Location(s) during deployment. Include dates of movement, if applicable).
3. Situation Background. Briefly describe the past and/or current situation that resulted in this deployment.
4. Personnel.
 - a. Military: Include the following information for ALL officers and enlisted personnel assigned to your area of responsibility who participated in this deployment.

FULL NAME	RANK	HOME UNIT

- b. Civilian: Include how this work force was obtained, responsibilities and wages.
5. Activities.
 - a. Patients – provide number of patient visits during deployment and include types of diagnoses and treatment.

- b. Classes – provide number of classes taught, audience composition and geographic location if different from assigned location.
 - c. Information specific to your specialty (i.e. number of patients and staff fed by Nutrition Care to include types of therapeutic diets).
 - d. Programs such as health promotion initiatives, multidisciplinary health care endeavors, etc. Briefly describe the program.
 - e. List duties you or other personnel in your area of responsibility performed that were not AOC/MOS specific.
 - f. Other – Opportunity to communicate to the SP Corps additional activities.
6. Preparation/Coordination completed prior to deployment. Indicate all requests for information, reviews of after action reports etc.
7. List prior training or experience that was most beneficial to you during this deployment.
8. Force Protection Assessment.
- a. Were pre-deployment briefings conducted including threat level for Host Nation?
 - b. Were U. S. Military Group (USMILGP) threat assessment (to include criminal activity) briefings conducted?
 - c. Active Force Protection measures.
9. Support.
- a. Describe who provided your supplies i.e. rations, medical supplies or education materials and how obtained. When were they received?
 - b. Interpreter Support. Needed: Yes or No. If yes, indicate number of interpreters, language, and who coordinated.
 - c. Transportation. Briefly describe transportation required to complete your mission and how it was obtained.
10. Staff Scheduling. Briefly describe duty schedule of personnel in your section to include hours on versus off and on call status.
11. Facility and Equipment. Briefly describe type of facility and equipment available for use.

Include who was responsible for facility maintenance and cleaning.

12. Living Situation. Briefly describe your living situation.

13. Observations/Recommendations. (Please complete this section for **EACH** observation).

a. Observation #1:

(1) Discussion

(2) Lessons Learned

(3) Recommended Action

(4) Comments

b. Observation #2:

(1) Discussion

(2) Lessons Learned

(3) Recommended Action

(4) Comments

14. Additional Comments. Provide any additional comments that you feel would be beneficial to other AMSC members who will deploy in the future.

15. You are highly encouraged to include/ attach photos of this deployment to this report.

Signature Block of Reporting Individual

Email or mail report to:

Office of the Chief, SP Corps
2250 Stanley Rd, Suite 276A
Fort Sam Houston, TX 78234

Appendix P

Trip Report

(Date)

MEMORANDUM THRU Secretary of the General Staff

FOR

SUBJECT: Trip Report for (Location), (Date)

1. ADMINISTRATIVE DATA:

- a. ACTIVITY VISITED: (If not the same location as the subject site).
- b. DATE: (Not always the same as location date).
- c. PERSONNEL CONTACTED: May be an enclosure.
- d. TDY COST: Take info from DD Form 1610 (TDY orders).

2. PURPOSE. State the purpose of the trip.

3. EXECUTIVE SUMMARY. Summarize areas/functions observed, cite commendable and major areas. Comment on morale, command climate, and effectiveness of activities visited. Describe assistance provided/conducted.

4. STAFF OVERSIGHT FINDINGS. List findings of the activity's compliance with policy and mission performance and capability.

a. COMMAND INTEREST. List findings concerning any items of special interest identified by a member of the command group.

b. STAFF INTEREST. List findings that may require follow-up action by a member of the AMEDDC&S Staff. The Chief of Staff will review the findings and assign staff action. These may be listed here and supported by more detailed information in an enclosure.

c. AREAS OF EXCELLENCE. List areas of excellence that may be of benefit to the AMEDDC&S if shared. These may also be shown in enclosures. Include a point of contact name and telephone number.

Encl

Trip OIC

Signature block

CF:
IG

Appendix Q

Injury Data Collection

The following page is a recommended form for gathering information on the incidence and risk of injuries for a population of interest. It is designed to answer the following questions:

- 1) What is the incidence of injury? (Percentage of soldiers who present with one or more injuries)
- 2) What body areas are most frequently injured? Are there any patterns?
- 3) What is the most frequent kind of injury? Are there any patterns?
- 4) During what activities do the injuries occur? This may reveal areas of training that require surveillance.
- 5) Can any categories (gender, MOS, unit) be identified that are more at risk?
- 6) Do any of the above findings indicate patterns of injury or risk factors that require further investigation → modification?

The bottom line is: if there is a problem with injuries, how can we reduce them? A problem must be identified before it can be resolved.

The form can be used retrospectively, for example, with a medical record review, or prospectively, as a soldier presents for treatment. The codes to the right of each item are designed to standardize data entry to enable compilation of databases and ease of statistical analysis.

INJURY DATA SHEET

Name: _____ Type of Unit: _____ Date: _____

SSN: _____ Age: _____ • M • F MOS: _____

Category: • U.S (AD) • USAR • Allied • US civilian • Native

Sick Call

Appointment

Injury Type

Profile

<p><u>Profile Days</u></p> <p>• Injury</p> <p>• Illness</p>	<p>• New Injury</p> <p>• Follow-up</p>	<p>• Traumatic</p> <p>• Overuse</p>	<p>• Yes</p> <p>• No</p> <p>• Unknown</p>
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Cause

For traumatic injuries, the specific activity or condition that caused the injury, i.e. flag football.

Follow-up visits for this injury _____

Injury/Diagnosis Code (choose only one)

Date of Injury: _____

Body Part Injured (choose one only)

• head/skull (not face)	1
• face	2
• neck/upper back	3
• shoulder/upper arm	4
• elbow/forearm	5
• wrist/hand/fingers	6
• abdomen/chest	7
• low back	8
• pelvis/hip	9
• groin/thigh	10
• knee	11
• calf/lower leg	12
• ankle	13
• foot/heel/toe	14
• other _____	16
• unknown	17
• NA	18

• stress reaction/fracture	1
• tendonitis/bursitis/fasciitis	2
• pain	3
• strain/sprain	4
• fracture, acute	5
• dislocation/subluxation	6
• tear/rupture	7
• blister	8
• abrasion/contusion	9
• laceration	10
• heat injury	11
• cold injury	12
• other _____	16
• unknown	17
• NA	18

Injured during:

• unit PT	1
• field training	2
• garrison duty	3
• off duty, sports/exercise	4
• off duty, other	5
• unknown	17
• NA	18

Illness Diagnosis Code:

• upper respiratory infection	1
• lower resp. infection (pneumonia)	2
• asthma	3
• diarrhea/gastroenteritis/vomiting	4
• other gastrointestinal	5
• dermatological/skin	6
• cardiovascular	7
• STD	8
• genito-urinary (not STD)	9
• eye	10
• fever/other infection	11
• psychiatric	12
• headache	13
• other CNS	14
• cellulitis	15
• other _____	16
• unknown	17
• NA	18

INSTRUCTIONS FOR USE OF THE INJURY DATA SHEET

<u>Name:</u>	Last name of soldier
<u>Type of Unit:</u>	Can indicate type of unit (i.e. infantry, artillery), or for the 232d Med Bn injury study, the soldier's company, i.e. "B"
<u>Date:</u>	Today's date
<u>SSN:</u>	The last 4
<u>Age:</u>	Omit for this study. Information obtained from questionnaire.
<u>Gender:</u>	Omit for this study. Information obtained from questionnaire.
<u>Category:</u>	Omit for this study. Intent is for use in multinational environments.
<u>Sick Call:</u>	Omit for this study. Can be used when screening for both or either injury or illness
<u>Appointment:</u>	Omit for this study.
<u>Injury Type:</u>	Indicate traumatic only in the case of a sudden, acute injury, such as a hamstring pull or ankle sprain.
<u>Profile:</u>	Self-explanatory. Can be left blank if profile days are indicated.
<u>Profile days:</u>	Indicate # of days on profile. If on a subsequent visit more profile days are added, write "+ (the number of additional profile days), such as
5 +	7 + 10.
<u>Cause:</u>	Fill in if the cause of the injury is indicated, i.e. stepped in pothole during am run.
<u>#Follow up visits:</u>	Add a tally mark for each additional visit generated from that injury. Do not include the initial visit. If the injury is extended into AIT, use reverse side of sheet, fill in appropriate boxes below "cause," and indicate "from BCT."
<u>Date of Injury:</u>	If documented, indicate week of training. If not, the approximate date the injury began. This may not be the day they were seen at the TMC.
<u>Body Part:</u>	Mark appropriate box.

Injury DX Code: Mark appropriate box. Mark “pain” for non-specific musculoskeletal pain, such as shin splints. A hamstring pull is marked “groin/thigh” and “strain/sprain.” Mark the “strain/sprain” category for acute musculoskeletal injuries.

Injured During: If the activity during which the injury occurred is documented, fill in the appropriate box. Road marches are in the field-training category.